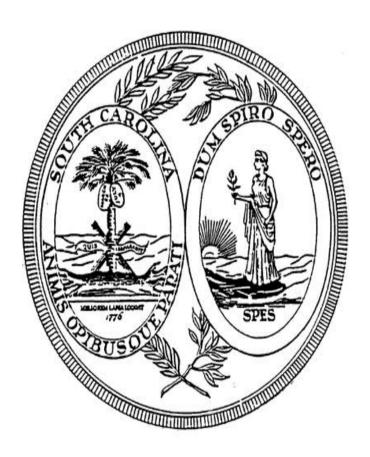
# **Name of Company**



## Form must be completed and returned by July 1, 2011 to:

South Carolina Office of Regulatory Staff
Universal Service Fund Administrator
1401 Main Street, Suite 900
Columbia, SC 29201

For ORS Use Only
USF FORM
Entered:

Revised 3/12/2012

#### **Contributor Identification Information**

(1) Legal Name of Reporting Entity	
(2) IRS Employer Identification Number	
(3) Name(s) by which Reporting Entity is doing business, if different than	
Name	
in Line 1 above (DBA or FKA)	
<u></u>	
(4) Complete Mailing Address of Reporting Entity	
<u></u>	
(5) Name of Individual completing this worksheet	
(6) Telephone Number of Individual completing this worksheet	
(7) E-mail Address of Individual completing this worksheet	
(8) Fax Number of Individual completing this worksheet	
(9) Mailing Address for Universal Service Fund Bills (if different than Line 4	
above)	
(10) Contact Name for questions related to Universal Service Bills (if	
different than Line 5 above)	
(11) Telephone Number of Individual on Line 10	
(12) E-mail Address of Individual on Line 10	
(13) Type Communications Service Provided	
(14) Date Carrier began providing services in South, Carolina (Month, Year)	

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Legal Name of Reporting Entity				
	Α	В	С	D
	INTRASTATE South Carolina End User (Retail)	INTERSTATE South Carolina End User (Retail)	Carrier's Carrier (Wholesale)	Total (COLUMN A + COLUMN B = COLUMN D)
Gross South Carolina Revenues From All Sources				
201 - Surcharges or other amounts on bills identified as recovering both state and				
federal Universal Service contributions				
Fixed Local Services				
202 a - Monthly service, local calling, connect charges, vertical features, and other				
local exchange service charges including the basic local service revenues except for				
local private line revenues, special access revenues, and revenues from providing mobile or cellular services.				
202 b Wireless ETC monthly and prepaid service revenues including paging and				
mesaging service, connection and restoration service, and other mobile services.				
202 c Lifeline and Link-up Revenues: Revenue generated from Lifeline customers				
exceeding all federal/state Lifeline and Linkup reimbursement.				
203 a Tariffed subscriber line charges and PICC charges levied by local exchange carrier on a no PIC customers				
203 b Revenues from Subscriber Line Charges billed to Public Telephone Access				
Line Services				
204 - Local private line and special access service				
205 a Payphone coin in box local and long distance revenues				
205 b Revenues from Payphone Telephone Access Line Services (Resale)				
206 a Other local telecommunications service revenues				
206 b For wireless ETCs, revenues associated with roaming and pass through				
charges 207 - Prepaid calling card (including card sales to customers and non-carrier				
distributors but <u>excluding</u> international calling) reported at face value of cards.				
208 - Interstate and intrastate operator and toll calls with alternate billing				
arrangements (credit card, collect, , etc.) 209 a - Ordinary Interstate and Intrastate long distance (direct-dial IVITS, customer				
toll-free 800/888 service, "10-10" calls, associated monthly account maintenance,				
PICC pass-through, and other switched services not reported above				
209 b For Wireless ETCs, long distance revenues ( <u>excluding</u> international)				
210 - Long distance private line services ( <u>excluding</u> international)				
211 - All other long distance services ( <u>excluding</u> international)				
212 - Universal service support received from federal and state sources (both USF				
and Interim LEC Funds)				
213 - Revenues from provision of broadband services				
214 - Monthly service and activation charge revenues from mobile (including				
wireless telephony, paging and messaging and other mobile services) services				
215 - Mobile service message charges including roaming ( <u>excluding</u> toll charges) 216 - International operator and toll calls, international calling card sales,				
international private line services and any other international services 217 - Revenues from other non-telecommunications services, including, but not				
limited to: Information services, inside wiring maintenance, billing and collection,				
customer premises equipment, published directory, CATV, and dark fiber				
218 - Gross revenues from all sources (Lines 201 through 217)				

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Legal Name of Reporting Entity				
	Α	В	С	D
	INTRASTATE South Carolina End User (Retail)	INTERSTATE South Carolina End User (Retail)	Carrier's Carrier (Wholesale)	Total (COLUMN A + COLUMN B = COLUMN D)
South Carolina State USF Fund Contribution Revenue: 219 - Total Gross universal service contribution base amounts - Lines 201 through 211				
220 - Uncollectible revenue/bad debts expense associated with gross revenue amounts on Line 218				
221 - Uncollectible revenue/bad debts expense associated with universal service contribution amounts on Line 219				
222 - Total Universal Service Fund Contribution Base Revenue (Line 219 minus Line 221)				

difficults on line 210				
221 - Uncollectible revenue/bad debts expense associated with universal service contribution amounts on Line 219				
222 - Total Universal Service Fund Contribution Base Revenue				
(Line 219 minus Line 221)				
	1			
Data Certification and Non-Disclosure Statement				
I certify that the revenue data contained herein is privileged and confidential and the	at public disclosure of	f such information wo	uld likely cause subst	antial harm to the
competitive position of the company. Pursuant the South Carolina Public Service Co	mmission USF Guideli	nes, I request non dis	closure of the revenu	e information contained
I certify that I am an officer of the above named reporting entity, that I have examine	ed the foregoing repo	ort and, to the best of	my knowledge, infori	mation and belief, all
statements of fact contained in this Worksheet are true and that said Worksheet is a				
addition, I swear, under penalty of perjury, that all requested identification registration				,
Signature		·		
Signature	First	Middle Initial	Last	
Print Name of Officer				
Position with reporting entity				
Business telephone number				
Email of Officer - Required				
Date				